

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) TSRI 504.1										
<div style="border: 1px solid black; padding: 2px; margin: 2px 0;">In re Application of Verdaguer, et al.</div> <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px; margin: 2px 0;"><div>Application Number 09/202,838</div><div>Filed 6/20/97</div></div> <div style="border: 1px solid black; padding: 2px; margin: 2px 0;">For CASSAVA VEIN MOSAIC VIRUS PROMOTERS...</div> <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px; margin: 2px 0;"><div>Group Art Unit unknown</div><div>Examiner unknown</div></div>												
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%;"><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align: right;">\$ 380.00</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align: right;">\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p>A small entity statement under 37 CFR 1.27:</p> <p><input type="checkbox"/> is enclosed.</p> <p><input type="checkbox"/> has already been filed in this application.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-0962</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest.</p> <p><input type="checkbox"/> applicant.</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p style="margin-left: 150px;">Registration number if acting under 37 CFR 1.34(a). _____</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="text-align: center;"><u>1/21/2000</u> Date</div><div style="text-align: center;"> Signature</div></div> <div style="display: flex; justify-content: center; margin-top: 10px;"><u>Thomas Fitting</u> Typed or printed name</div>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 380.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____
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